

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 570

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Nevada State Democratic Party

Full Name (Last, First, Middle Initial)

A. Jette Laws

Mailing Address 34 N Portola Rd

City	State	Zip Code
Laguna Beach	CA	92651

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : 11ai-000047433

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

Reid Nevada Fund

Full Name (Last, First, Middle Initial)

B. Andrew Woods

Mailing Address 6500 Abbey View Way

City	State	Zip Code
Baltimore	MD	21212

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2014

Transaction ID : 11ai-000047434

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

Reid Nevada Fund

Full Name (Last, First, Middle Initial)

C. Mark JamesMailing Address 4001 S. Decatur Blvd
Ste 37-357

City	State	Zip Code
Las Vegas	NV	89103

FEC ID number of contributing federal political committee.

C

Name of Employer

Frias Holding Company

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

Transaction ID : 11ai-000047435

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

Reid Nevada Fund

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶